MEMORANDUM

TO: Vermont Children's Performance Indicator Project Advisory Group

FROM: John Pandiani

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DATE: September 18, 1997

RE: Community Mental Health, SRS, and Special Education EBD Caseloads,

FY1996

This week's Children's Services Performance Indicator report is the fourth in a series focusing on caseload overlap among community mental health, special education for an EBD, and SRS caseloads. The analysis this week looks at the number of children and adolescents served by each service sector in each community mental health service area.

Next week's PIP report will provide unduplicated counts of children and adolescents served by any of the three service sectors.

As you review these data on caseload overlap, we will be particularly interested in your comments on the quality of the data, the appropriateness of the analysis, and the effectiveness of the presentation of these data, as well as your interpretation of the results.

Caseload Size In Three Service Sectors

QUESTION: How many children and adolescents in each of Vermont's ten community mental health service areas are served by community mental health programs, social and rehabilitation services, and special education for an EBD? How do these regional numbers compare per capita?

DATA: Data on children and adolescents (under 22 years of age) who were served by Children's Services Programs at CMHCs in Vermont during FY1996 were obtained from the Quarterly Service Reports provided to the Department of Developmental and Mental Health Services (DDMHS) by the community service providers. Data items used in this analysis include program and provider codes, client date of birth, and gender. The QSR includes a provider specific person identification number but does not include a statewide unique person identifier.

A data file describing all children and adolescents who were on SRS caseload during FY1996 was obtained from SRS. Data items used in this analysis include student date of birth, gender, and disability code. The SRS database extract does not include a unique person identifier.

A data file describing all children and adolescents, who were on IEPs on December 1, 1995, was obtained from the Vermont Department of Education. These data were collected as part of the 1995 Child Count Data project. Data items used in this analysis include student date of birth, gender, and disability code. The Child Count Data Set does not include a unique person identifier although each record is a unique individual. Thirty-four children and adolescents on an EBD/IEP were excluded from the analysis because they were out-of-state, in correctional facilities, parochial schools, or home tutoring and could not be assigned to a community mental health service area.

ANALYSIS: Because the SRS data set does not contain a unique person identifier, Probabilistic Population Estimation was used to derive an unduplicated number of individuals in the data set. Results of this probabilistic estimation are presented with 95% confidence intervals.

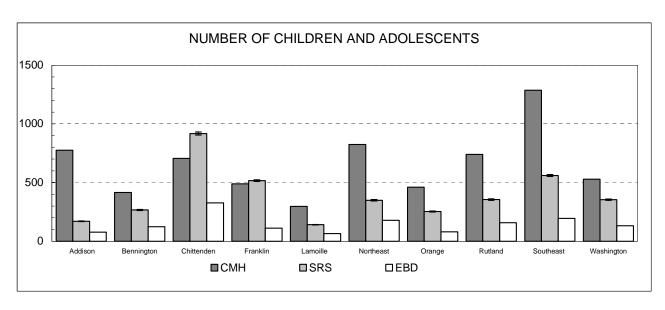
Per capita numbers for each service sector are based on the projected population of children and adolescents under the age of 22 who reside in each community mental health service area.

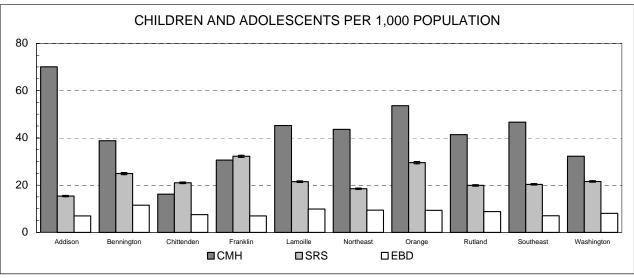
RESULTS: Community mental health programs served the largest number of children and adolescents per capita in eight of the ten mental health service areas. SRS had the highest per capita rates in the Chittenden and Franklin service areas. Per capita rates for special education students on an IEP for an EBD were the smallest in all ten community mental health service areas.

Per capita rates for children and adolescents served by SRS and Special Education EBD programs were relatively consistent across the regions. Community mental health caseloads had the greatest per capita variation.

NEXT QUESTIONS: How many individual children and adolescents are served by the three service sectors as a whole in each of the ten community mental health service areas? How does this unduplicated number of children and adolescents served by the three service sectors as a whole compare when viewed as per capita rates?

COMMUNITY MENTAL HEALTH, SOCIAL AND REHABILITATION SERVICES, AND SPECIAL EDUCATION EBD CASELOADS, FY1996





Region/Provider	Population ¹	Number of Children and Adolescents Served			Children and Adolescents Served Per 1,000 Population ⁵		
region// Tovider	Opulation	CMH ²	SRS ³	EBD ⁴	CMH ²	SRS ³	EBD ⁴
Addison - CSAC	11,078	776	170 <u>+</u> 3	77	70	15 <u>+</u> 0.3	7
Bennington - UCS	10,734	416	267 <u>+</u> 4	124	39	25 <u>+</u> 0.4	12
Chittenden - HCHS	43,730	706	918 <u>+</u> 13	326	16	21 <u>+</u> 0.3	7
Franklin - FGI	16,016	490	516 <u>+</u> 7	112	31	32 <u>+</u> 0.5	7
Lamoille - LCMHS	6,588	298	141 <u>+</u> 2	65	45	21 <u>+</u> 0.3	10
Northeast - NEK	18,906	825	349 <u>+</u> 5	178	44	18 <u>+</u> 0.3	9
Orange - CMC	8,598	461	254 <u>+</u> 4	80	54	30 <u>+</u> 0.4	9
Rutland - RACS	17,877	740	355 <u>+</u> 5	157	41	20 <u>+</u> 0.3	9
Southeast - HCRSS	SV 27,572	1287	560 <u>+</u> 8	194	47	20 <u>+</u> 0.3	7
Washington - WCMH	S 16,429	529	354 <u>+</u> 5	132	32	22 <u>+</u> 0.3	8

¹ Population figures are based on quarterly service reports submitted by Vermont's Community Service Providers for FY1996. Population figures are projections for 1995 based on the latest estimates published by the Vermont Department of Health and the Center for Rural Studies at the University of Vermont. 'Children's Population' includes people less than 22 years of age.

² Based on Children's Service Programs data from quarterly service reports submitted by Vermont's Community Service Providers for FY1996.

 $^{^{\}rm 3}$ Based on Probabilistic Population Estimation; includes 95% confidence interval.

⁴ Based on data from the 1995 Child Count Data Project, compiled by the Vermont Department of Education.

⁵ Based on the projected number of children and adolescents in each CMH service area.